The	USE	R CHARGE SELF	MONITORING	REPORT	
				REPORT E G E I W E	
NAME:	Sianm	asters, Inc.			
ADDRESS:	217 B	rook Avenue D-		du 8	
FACILITY LOCATION:	SAME	rook Avenue, Pa	assaic Park,	NJ 07055 2008	
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my under penalty of law the	at this docu	iment and all attachment	ts were prepared u	nder my direction or supervision in	
itted. Based on my inquiry	of the perso	On or parent	i property gather a	and evaluate the information	
athering the information th	e informat	ion submitted the	ge the system, or th	ose persons directly responsible	
lete. I am aware that there:	are signific	ant penalties for submitt	ing false information	ge and belief, true, accurate and	
and imprisonment for kno	owing viola	tions.	ooi math	on, merading the possibility	
SIGNATURE OF PRINCIP	PALOR				
SIGNATURE OF PRINCIPAL OR AUTHORIZED AGENT		TYPE NAME AND TITLE		TELEPHONE NUMBER	
1-11.	* * *			, .	
12m		Mr. John Bel	nowski	7/7/05	
		Super, Envir.	Health s	///	
		Touber, Bustl.		973-614-8300	
		•	Safety	DATE	

'VSC FORM MR-2 REV.3 6/93

	USER CHAR	GE SELF MO	VITORING	REPORT ()	EGEM	V
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AME:	Signmaster				JUL 8 200	10
DDRESS:	217 Brook	Avenue, Pas	saic Par	k, NJ 07055	200	צו
ACILITY LOCATION:	Same			1 spray as	The state of the s	
EW CUSTOMER ID / OUT	TLET ID: 262200	28-20LD OUT	LET DESIGNA	ATION:	Alleganie de la companya de la comp	
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I certify under penalty of lay that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL OR AUTHORIZED AGENT	TYPE NAME AND TITLE	TELEPHONE NUMBER
fr her	Mr. John Belnowski Supervisor, Environment	11
	Health & Safety	973-614-8300 DATE 7/7/8
PVSC FORM MR-3 REV J 622		·